

**FLORIDA DEPARTMENT OF STATE    DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) James (Jim) Moore

Name

(2) 5602 SW 57 Place

Address (number and street)

Davie, FL 33314

City, State, Zip Code

☐ CHECK IF ADDRESS HAS CHANGED

(3) ID Number: \_\_\_\_\_

(4) Check appropriate box(es):


☒ Candidate (office sought): Davie Town Council, District 1☐ Political Committee☐ CHECK IF PC HAS DISBANDED☐ Committee of Continuous Existence☐ CHECK IF CCE HAS DISBANDED☐ Party Executive Committee☐ Electioneering Communication☐ CHECK IF NO OTHER ELECTIONEERING  
COMMUNICATION REPORTS WILL BE FILED**(5) REPORT IDENTIFIERS**Cover Period: From 3 / 9 / 12 To 6 / 11 / 12 Report Type TR☒ Original    ☐ Amendment    ☐ Special Election Report    ☐ Independent Expenditure Report**(6) CONTRIBUTIONS THIS REPORT**Cash & Checks    \$ 300.00Loans    \$ 0.00Total Monetary    \$ 0.00In-Kind    \$ 0.00**(7) EXPENDITURES THIS REPORT**Monetary  
Expenditures    \$ 387.57Transfers to Office  
Account    \$ 0.00Total  
Monetary    \$ 387.57**(8) Other Distributions**  
\$ 0.00**(9) TOTAL Monetary Contributions To Date**\$ 6,675.00**(10) TOTAL Monetary Expenditures To Date**\$ 6,675.00**(11) CERTIFICATION****It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**I certify that I have examined this report and it is true,  
correct, and complete.(Type name) Deborah Moore☐ Individual (only for  
electioneering commun.)    ☒ Treasurer    ☐ Deputy Treasurer**X**

Signature

I certify that I have examined this report and it is true,  
correct, and complete.(Type name) James Moore☒ Candidate    ☐ Chairperson (only for PC, PTY &  
electioneering commun. organization)**X**

Signature

# CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

06-11-12P03:35 RCVD 

(1) Name James (Jim) Moore

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 3 / 9 / 12 through 6 / 11 / 12 (4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
(6) Sequence Number		Type	Occupation	Type	Description		
4 / 10 / 12	Town of Davie 6591 Orange Drive Davie, FL 33314	○	Sign Bond Refund	CHE			\$300.00
1							
/ /							
/ /							
/ /							
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# **CAMPAIGN TREASURER'S REPORT - ITEMIZED EXPENDITURES**

(1) Name James (Jim) Moore

(2) I.D. Number \_\_\_\_\_

(3) Cover Period 3 / 9 / 12 through 6 / 11 / 12(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
5 / 14 / 12	HOPE Outreach Center 4700 SW 64 Avenue Suite A Davie, FL 33314	Donation	DIS		\$150.00
1					
5 / 14 / 12	Police Athletic League Davie Police Department 1230 S. Nob Hill Road Davie, FL 33324	Donation	DIS		\$150.00
2					
6 / 11 / 12	James J. Moore 5602 SW 57 Place Davie, FL 33314	Reimbursement for Office Goods	MON		\$87.57
3					
/ /					
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/ /					
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